

OFFICIAL USE ONLY

(When Completed)

DEPARTMENT OF TRANSPORTATION
SUITABILITY DETERMINATION NOTIFICATION

INDIVIDUAL'S LAST NAME, FIRST NAME, MIDDLE NAME OR INITIAL	DATE OF BIRTH	POSITION OCCUPIED OR FOR WHICH APPLYING
SECTION 1. REQUEST FOR SUITABILITY DETERMINATION		
<p>Investigation of the above person on matters within the jurisdiction of the Department has developed information which we believe may be of interest to you in your assessing suitability for employment. Your determination on the case and information on any administrative or corrective action you may take will be helpful to us in our evaluating the case in respect to pending or future security determinations. Please advise us of your decision by completing Section II of this form, and returning it with any attachments to us within 30 days. Let us know if you need additional information or other assistance on the matter. The information is:</p> <p><input type="checkbox"/> Included in the attached investigative report or file.</p> <p><input type="checkbox"/> Summarized as follows:</p>		
DATE	SECURITY OFFICE	SECURITY OFFICIAL SIGNATURE
SECTION II. NOTIFICATION OF SUITABILITY DETERMINATION		
<p>The suitability information you provided has been evaluated, with the results shown below.</p> <p><input type="checkbox"/> A favorable suitability determination was made, but corrective action (caution, reprimand, suspension, etc.) is planned or has been taken: Date: Action:</p> <p><input type="checkbox"/> Applicant dropped from consideration because of the information.</p> <p><input type="checkbox"/> Applicant declined position, but would not be considered eligible if he reapplied.</p> <p><input type="checkbox"/> Employee voluntarily terminated before conclusion reached.</p> <p><input type="checkbox"/> Removal because of the information is planned.</p> <p><input type="checkbox"/> Other (Explain).</p> <p>REMARKS:</p>		
DATE	PERSONNEL OFFICE	PERSONNEL OFFICIAL SIGNATURE